## 2003 NOT-FOR-PROFIT CORPORATION

## FILED Feb 03, 2003 8:00 am UNIFORM BUSINESS REPORT (UBR) Secretary of State **DOCUMENT # 728711** 1. Entity Name 02-03-2003 90299 044 \*\*\*\*61.25 HARBORDALE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1001 SE 16TH ST. 1001 SE 16TH ST. FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316 90016956 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1612258 Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SAMMI e MILES, SAMMIE Street Address (P.O. Box Number is Not Acceptable) -1323 SE 17TH STREET #19-0 # 460682 SUITE 694 LAUdendale FORT LAUDERDALE FL 33316 ~ Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 33346 the obligations of registered agent. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Addition RICARDS, CHARLES MARY DEN EYS NAME NAME 1001 SE 16TH STREET - #13 1001 SE 16 ST, #13 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 23316 CITY-ST-ZIP FT. LAUderdale, FL 33316 Christine (Couter 1010 SE, 15th ST, # 10 TITLE ☐ Change DECKER, JEAN NAME NAME 1001 SE 16TH-ST, #10 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33316 CITY-ST-ZIP = FT. LAUdendale, FL=3-3316-TITLE ☐ Delete TITLE ☐ Addition ☐ Change MILLER, MICHAEL NAME STREET ADDRESS 1001 S E 16 ST # 8 STREET ADDRE CITY-ST-ZIP FT. LAUDERDALE FL 33316 CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition MILES, SAMMIE NAME NAME 1323 SE 17TH ST, #694 STREET ADDRESS STREET ADDRES CITY-ST-ZIP FT. LAUDERDALE FL 33316 CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition LAVECCIA, GENEVIVE NAME NAME STREET ADDRESS 1001 S E 16 ST # 4 CITY-ST-ZIP FORT LAUDERDALE FL 33316 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

TITLE

**SIGNATURE:** 

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Change

☐ Addition